

**U.S. IMMIGRATION AND CUSTOMS ENFORCEMENT
ENFORCEMENT AND REMOVAL OPERATIONS
ICE HEALTH SERVICE CORPS**

**SAFETY, INFECTION PREVENTION, AND CONTROL PROGRAM
ADMINISTRATION**

**IHSC Directive: 05-01
ERO Directive Number: 11776.2
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26 Mar 2014
Annual Review: 21 Mar 2016 No Changes**

**By Order of the Acting Assistant Director
Stewart D. Smith, DHSc/s/**

1. **PURPOSE.** The purpose of this issuance is to set forth the policies for the administration and oversight of the U. S. Immigrations and Customs Enforcement (ICE) Health Service Corps (IHSC) Safety, Infection Prevention and Control (SIPC) Program.
2. **APPLICABILITY.** This directive applies to all IHSC personnel, including but not limited to, Public Health Service (PHS) officers and civil service employees supporting health care operations in ICE-owned or contracted detention facilities and to IHSC Headquarters (HQ) staff. This directive applies to contract personnel when supporting IHSC in detention facilities and at HQ. Federal contractors are responsible for the management and discipline of its employees supporting IHSC.
3. **AUTHORITIES AND REFERENCES.**
 - 3-1. Title 8, Code of Federal Regulations, section 235.3 (8 CFR 235.3), Inadmissible Aliens and Expedited Removal.
 - 3-2. Section 232 of the Immigration and Nationality Act (8 USC 1222), Detention of aliens for physical and mental examination.
 - 3-3. Title 8, Code of Federal Regulations, section 232 (8 CFR 232), Detention of Aliens for Physical and Mental Examination.
 - 3-4. Section 322 of the Public Health Service Act (42 USC 249(a)), Medical Care and Treatment of Quarantined and Detained Persons.

- 3-5. Title 42, U.S. Code, Public Health Service Act, Section 252 (42 USC 252); Medical Examination of Aliens.
 - 3.6. Privacy Act of 1974; 5 U.S.C. § 552a; Department of Homeland Security U.S. Immigration and Customs Enforcement—013 Alien Medical Records System of Records, 74 Fed. Reg. 57688 (Nov. 9, 2009).
 - 3-7. Title 29, Code of Federal Regulations (CFR), Part 1960, Basic Program Elements for Federal Employee Occupational Safety and Health Programs and Related Matters.
 - 3-8. Executive Order 12196, Occupational Safety and Health Programs for Federal Employees.
 - 3-9. The Occupational Safety and Health Act (OSH Act) of 1970, Pub. L. No. 91-596.
 - 3-10. DHS Directive (MD) 066-01 Safety and Health Programs as amended.
4. **POLICY.** IHSC maintains an active SIPC Program that provides the framework for protecting the health and safety of the people working, visiting, or being treated in IHSC-staffed medical clinics and ensures that they comply with the relevant laws, regulations, and standards.
- 4-1. **SIPC Program Implementation**
- a. The IHSC Assistant Director (AD) is responsible for oversight of overall health and safety within the medical clinic area.
 - b. The AD delegates oversight responsibility of the SIPC Program at the national level to the Public Health, Safety, and Preparedness (PHSP) Unit.
 - c. The AD delegates oversight responsibility of the SIPC Program in the IHSC medical clinic to the Health Services Administrator (HSA).
 - d. The HSA appoints at least two SIPC Coordinators to support SIPC Program implementation within the medical clinic.
 - (1) The HSA prepares SIPC Coordinator appointment memos and places a copy in the respective employees' personnel files.
 - e. The SIPC Coordinator must be allowed to spend a minimum of four hours per week working on SIPC Program activities.

- f. Health staff performs SIPC Program activities with oversight following the standard supervisory chain of command.

4-2. SIPC Committee

- a. The SIPC Committee serves as a forum for safety and infection prevention and control issues.
- b. The PHSP Unit oversees and convenes monthly SIPC Committee meetings, creates agendas, and writes meeting minutes.
- c. SIPC Coordinators are official members of the SIPC Committee, attend monthly meeting conference calls, and ensure that meeting information is conveyed to the HSA.
- d. At least one SIPC Coordinator or designee from each medical clinic attends the monthly SIPC Committee meeting.

4-3. Orientation and Training

- a. The HSA provides oversight for the implementation of formalized orientation and annual training for health staff on topics inclusive of this directive.
- b. Orientation and training is documented and records are maintained on site for a minimum of three years after the date of training.

4-4. SIPC Program Components

- a. The SIPC Program comprises the following components:
 - (1) Occupational Health.
 - (2) Safety and Security.
 - (3) Emergency Preparedness.
 - (4) Infectious Disease Public Health Actions.
 - (5) Environmental Health.

5. PROCEDURES. None.

6. HISTORICAL NOTES. This is an annual review with no changes.

7. **DEFINITIONS.** See [IHSC Glossary](#).

8. **APPLICABLE STANDARDS.**

8-1. **Performance Based National Detention Standards (PBNDs):**

- a. 1.2 *Environmental Health and Safety*.
- b. 7.3 *Staff Training*.

8-2. **American Correctional Association (ACA):**

- a. 4-ALDF-1 *Safety*.
- b. 4-ALDF-4 *Care*.

8-3. **National Commission on Correctional Health Care (NCCHC):**

- a. J-B-01 *Infection Control*.
- b. J-B-02 *Patient Safety*.
- c. J-B-03 *Staff Safety*.

9. **RECORDKEEPING.** IHSC maintains detainee health records as provided in the Alien Medical Records System of Records Notice, 74 Fed. Reg. 57688 (Nov 9, 2009).

Protection of Medical Records and Sensitive Personally Identifiable Information.

- 9-1. Staff keeps all health records, whether electronic or paper, secure with access limited only to those with a need to know. Staff locks paper records in a secure cabinet or room when not in use or not otherwise under the control of a person with a need to know.
- 9-2. Staff is trained at orientation and annually on the protection of a detainee's medical information and Sensitive PII.
- 9-3. Only authorized individuals with a need to know are permitted to access medical records and Sensitive PII.
- 9-4. Staff references the Department of Homeland Security *Handbook for Safeguarding Sensitive PII* (Handbook) at:

(b)(7)(E)

when additional information is needed concerning safeguard sensitive PII

10. **NO PRIVATE RIGHT STATEMENT.** This directive in an internal policy statement of IHSC. It is not intended to, and does not create any rights, privileges, or benefits, substantive or procedural, enforceable against the United States; its departments, agencies, or other entities; its officers or employees; or any other person.